PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

□ Declaration Submitted with Initial Filing

☑ Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))

required)

Attorney Docket Number	96700/499
First Named Inventor	Buschke
COMPLETE	IF KNOWN
Application Number	09 / 369651
Filing Date	08/06/1999
Group Art Unit	3737
Examiner Name	

As a below named inven	itor, I hereby declare that:								
My residence, post office	My residence, post office address, and citizenship are as stated below next to my name.								
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural								
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MEMORY TESTS USING ITEM-SPECIFIC WEIGHTED MEMORY MEASUREMENTS AND USES THEREOF									
the specification of which is attached hereto	(Title	e of the Invention)							
xas filed on (MM/D	omm 08/06/19	99 as Unite	d States Applica	tion Number or P	CT International				
Application Number 09	/369651 and wa	as amended on (MM/DD/Y	m		(if applicable).				
	eviewed and understand the eart specifically referred to abo		tified specification	n, including the c	aims, as				
I acknowledge the duty to d	disclose information which is	material to patentability as	defined in 37 CI	FR 1.56.	,				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	oy Attached?				
			0000	0000	0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number	(s) Filing Date	e (MM/DD/YYYY)	numbe supple	onal provisional ers are listed or emental priority SB/02B attache	n a data sheet				
	l	i		•					

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION Iltility or Design Patent Application

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.	S. Par	ent Applicat Numb		PCT Parent				ing Date			ent Patent (if applica	
Number												
Additional	U.S. or	PCT internationa	l applicat	tion numbers ar	e listed on	a supplem	ental	priority data	sheet P	TO/SB/	02B attached	hereto.
As a named inv and Trademark	rentor, I i Office co	nereby appoint the connected therew	ith:	ng registered pr Customer Num <i>OR</i> Registered prac	ber			_]-		•	ect all business Place Cusi Number Bai Label he	tomer r Code
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Alison Craig (Kenneth	J. Ar	nold		P44,821 34,287 30,259								
Additional	renistera	d practitioner(s)	named o	n sunnlemental	Registere	1 Practition	er Info	ormation she	et PTO	/SB/020	attached her	eto
Direct all corr		ence to: 🔲	Custom	er Number Code Label	- Carotova			7			ondence add	
Name	Al	ison R. K	elly									
Address	Am	ster, Rot	hste	in & Ebe	nsteir	1						
Address	90	Park Ave	nue									
City	Ne	w York				State	1	NY	ZIP	10	0016	
Country	U.	S.A.		Telephon	ne (2]	.2) 69	7-59	995	Fax	(2)	L2) 286-	0082
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:												
Given Name (first and middle [if any])					Family Name or Sumame							
Herman					Buschke							
Inventor's Signature		Mumay Busche									Date	1/21/99
Residence: C	City	New York State NY			Country U.S.A. Citizenship U.S.			u.s.				
Post Office A	ddress											
Post Office A	ost Office Address 50 East 59th Street, Apt. 28E											
City		New York		N.Y.	ZIP	101	 128		Cou	ntry	U.S.A.	
Additional	invento	rs are being na			plement			ventor(s) s	heet(s)	PTO/	SB/02A atta	ched hereto

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DECLARATION

REGISTERED PRACTITIONER **INFORMATION** (Supplemental Sheet)

		(ouppiomotital)	
Name	Registration Number	Name	Registration Number
Morton Amster Jesse Rothstein Daniel S. Ebenstein Philip H. Gottfried Michael J. Berger Neil M. Zipkin Anthony F. LoCicero Joel E. Lutzker	16,677 20,118 24,932 25,871 25,829 27,476 29,403 29,406		Number

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